

**FEE CALCULATION SHEET**  
(FOR USE WITH FORM 9-875)

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1			
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20			1			
21				1	1	1
22				1	1	1
23				1	1	1
24				1	1	1
25				1	1	1
26				1	1	1
27				1	1	1
28				1	1	1
29				1	1	1
30				1	1	1
31				1	1	1
32				1	1	1
33				2	2	2
34				1	1	1
35			1		1	
36				1	1	1
37				1	1	1
38				1	1	1
39				1	1	1
40						
41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.			3		2	19
TOTAL DEP.			19		19	
TOTAL CLAIMS			22		21	

  

	IND.		DEP.		IND.		DEP.		IND.		DEP.	
51												
52												
53												
54												
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100												
TOTAL IND.												
TOTAL DEP.												
TOTAL CLAIMS												